24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Detroit Forward Federal	
	C C00563163
Check if X 24-hour report 48-hour report New report Amends report filed	I on Man / Dad / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
Barlow Communications	M M / D D / Y Y Y Y
Mailing Address 18145 East 8 Mile Rd	08 04 2014 Amount
City State Zip Code Grosse Pointe MI 48021	22000.00 Transaction ID : SE.4105
	Date of Disbursement or Obligation
Purpose of Expenditure Television Ad Category/ Type 004	08 04 7 2014
Name of Federal Candidate Support Office	e Sought: X House District: 13
JOHN JR. CONYERS Oppose	President Senate State: MI
Calendar Year-To-Date Per Election for Office Sought Disbut 22000.00 2014	ursement For:
Full Name of Payee	Date of Public Distribution/Dissemination
	M = M / D = D / Y = Y = Y
Mailing Address	
	Amount
City State Zip Code	
Purpose of Expenditure	Date of Disbursement or Obligation
Category/ Type	M M / D D / Y Y Y Y
Name of Federal Candidate Support Offic	e Sought: House District:
Oppose	President Senate State:
	ursement For: Primary General
Calendar Year-To-Date Per Election for Office Sought	
	Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	22000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	22000.00
	7 7
Under penalty of perjury I certify that the independent expenditures reported herein were not m with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Chris Jackson	
[Electronically Filed] Date	08 05 2014
Signature	